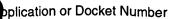


Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Claims as filed - part i								SMALL ENTITY			OTHER THAN		
TC	TAL CLAIRAC		(Column	1)	(Colu	mn 2)		TYPE [OR	SMALL	ENTITY	
10	TAL CLAIMS							RATE	FEE		RATE	FEE	
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CENTS	minus 20= * 40			<u>ノ</u>	.	X\$ 9=	360	OR	X\$18=		
IND	EPENDENT CL	AIMS 5	10 mi	nus 3 =	<u> </u>			X40=	280	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	,	OR	TOTAL		
Claims as amended - Part II										د	OTHER	THAN	
						(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
							<u>[</u>	TOTAL			TOTAL		
		(Oalous 4)		(0 - 1,	O\	(O = 1, o)	,	ADDIT. FEE (JOI1 .	ADDIT. FEE		
		(Column 1) CLAIMS	I	(Colur HIGH		(Column 3)	1 (<u> </u>	ADDI	} [
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X40=		OR	X80=		
8	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] }	71.5		OH			
								+135=		OR	+270=		
							A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)	จ						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>	-		UN			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													



PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART (Column 1)					-	mn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGEA	BLE CLAIMS	min	us 20=	•			X\$ 9=		OR	X\$18=	
INE	DEPENDENT CL	AIMS	mir	nus 3 =	*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter						olumn 2		TOTAL		OR	TOTAL	
						(Column 3)		OTHER THAT SMALL ENTITY OR SMALL ENT				
AMENDMENT A	1. 11. 1. 12.	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 77	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	TATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
	FINOT FRESE	INTATION OF IM	DETIFEE DEF	ENDEN	CLAIN		¹ [+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	•	(Column 1)		(Colu	mn 2)	(Column 3)			·	•	ADDII. I EE;	
AMENDMENT B	14.2 14.2	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER . OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AINA	=		X40=		OR	X80=	
<u> </u>	FINST PRESE	NIATION OF IM	JUITLE DEF	EINDEIN	CLAIM		」 [+135=		OR	+270=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATĖ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	; ;
	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	HRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN'	T CLAIM		1	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												